

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	28861-93821
	First Inventor	Frank T. Jackson
	Title	Rotary Latch Mechanism
	Express Mail Label	EV273132348US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages 22]</small> <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>[Total Sheets 8]</small>	b. Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> Paper
5. Oath or Declaration <small>[Total Pages 4]</small> <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	c. <input type="checkbox"/> Statements verifying identity of above copies
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

ACCOMPANYING APPLICATION PARTS	
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>	
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations	
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/> Other:	

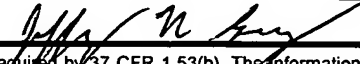
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS				
<input checked="" type="checkbox"/> Customer Number:	23644		or <input type="checkbox"/> Correspondence address below	
Name				
Address				
City	State	Zip Code		
Country	Telephone	Fax		

Name (Print/Type)	Jeffrey R. Gray	Registration No. (Attorney/Agent)	33,391
Signature		Date	October 27, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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17414 U.S. PTO
102703PTO/SB/17 (5-03)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$1,188.00

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Frank T. Jackson
Examiner Name	
Group Art Unit	
Attorney Docket No.	28861-93821

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit card	3. ADDITIONAL FEES	
<input type="checkbox"/> Deposit Account:		Large Entity Small Entity	
Deposit Account Number	12-0913	Fee Code (\$)	Fee Code (\$)
Deposit Account Name		1051 130	2051 65
The Director is authorized to: (check all that apply)		Fee Description	
<input type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments	1052 50	2052 25
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application		1053 130	1053 130
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1812 2,520	1812 2,520
		1804 920*	1804 920*
		1805 1,840*	1805 1,840*
		1251 110	2251 55
		1252 410	2252 205
		1253 930	2253 465
		1254 1,450	2254 725
		1255 1,970	2255 985
		1401 320	2401 160
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		1502 470	2502 235
		1503 630	2503 315
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		1807 50	1807 50
		1806 180	1806 180
		8021 40	8021 40
		1809 750	2809 375
		1810 750	2810 375
		1801 750	2801 375
		1802 900	1802 900
		Other fee (specify) _____	
		SUBTOTAL (3) (\$) \$40.00	

1. BASIC FILING FEE		2. EXTRA CLAIM FEES FOR UTILITY AND	
Large Entity	Small Entity	Extra Claims	
Fee Code (\$)	Fee Code (\$)	Fee from below	Fee Paid
1001 750	2001 375	21 X 18.00 =	378.00
1002 330	2002 165	3 X 0 =	0.00
1003 520	2003 260		
1004 750	2004 375		
1005 160	2005 80		
SUBTOTAL (1) (\$) \$770.00			

2. EXTRA CLAIM FEES FOR UTILITY AND	
Large Entity	Small Entity
Fee Code (\$)	Fee Code (\$)
1202 18	2202 9
1201 84	2201 42
1203 280	2203 140
1204 84	2204 42
1205 18	2205 9
SUBTOTAL (2) (\$) \$378.00	

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Jeffrey R. Gray	Registration No. (Attorney/Agent)	33,391
Signature		Telephone	312-214-4807
		Date	October 27, 2003

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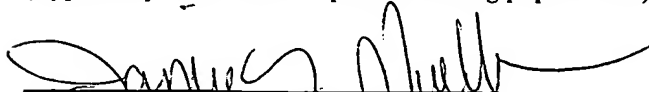
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"Express Mail" mailing label number
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Date of deposit: October 27, 2003

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§1.10 on the date indicated above and is addressed to
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Jamie L. Mueller
(Typed or printed name of person mailing paper or fee)


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